



Administration 797-1030
 Administrative Services 797-1020
 Budget & Finance 797-1050
 Community Services 797-1145
 Development Services 797-2076

Engineering 797-1070
 Fire Department 797-1060
 Police Department 797-1200
 Public Works 797-1240
 Utilities 433-4000

TOWN OF DAVIE 6591 SW 45th Street, Davie, Florida 33314-3399

(305) 797-1000

DATE February 19, 1999

NAME OF ORGANIZATION Hawkes Bluff Elementary School

ADDRESS 5900 S.W. 160 Avenue Davie FL 33331
 CITY STATE ZIP

NAME OF REPRESENTATIVE OF ORGANIZATION Jane Coffman, Principal

ADDRESS 5900 S. W. 160 Avenue Davie FL 33331
 CITY STATE ZIP

PHONE NUMBER 680-1177 NUMBER OF ENTRANTS IN PARADE 1,220

DATE OF PARADE March 25, 1999 HOURS OF PARADE 8:30 a.m. TO 10:00 a.m.

PARADE ROUTE See attached letter to Hawkes Bluff parents indicating route.

Applicant's Signature Jane Coffman

COUNCIL MEETING DATE 3/3/99

APPROVED

DENIED

NOTE: Per Section 21-4 of the Town Code, The council shall be the sole authority for the approval of permits to conduct parades on or about the public rights-of-way of the town. The civic organization making application to conduct such parade shall have the sole responsibility and prerogative to determine who the participants and/or participating organizations shall be. Permits shall be granted subject to Federal, State and Town of Davie laws.

THE TOWN OF DAVIE REQUIRES A CERTIFICATE OF INSURANCE OF NO LESS THAN \$1,000,000 NAMING THE TOWN OF DAVIE AS AN ADDITIONAL INSURED.

An Equal Opportunity Employer

HAWKES BLUFF HEART RUN/WALK PERMISSION FORM



February 22, 1999

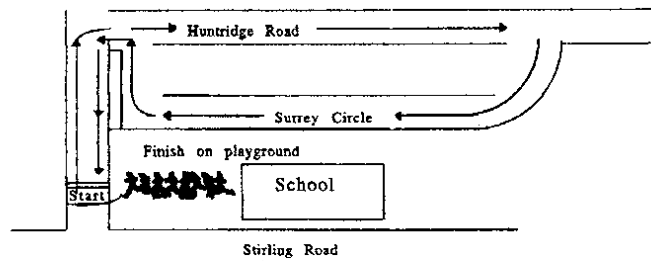
Dear Parent,

On March 25, 1999, at 8:30 a.m., students at Hawkes Bluff Elementary School will take part in a one mile, off-campus **HEART RUN/WALK**. This is a voluntary activity with an emphasis on finishing the mile. As a lead-up to this event, we have been stressing the importance of trying to develop and maintain a strong, healthy heart.

The route for the **HEART RUN/WALK** is shown below. In order to ensure a safe environment, the Davie Police Department will block off the run/walk area.

If you would like for your child to take part in the **HEART RUN/WALK**, please fill out the permission form and return it by Friday, March 19, 1999.

HEART RUN/WALK ROUTE



----- RETURN TO YOUR CHILD'S TEACHER -----



HEART RUN/WALK PERMISSION FORM

My child, _____, has my permission to take part in the Hawkes Bluff Elementary School one mile **HEART RUN/WALK**.

Parent's signature _____
Teacher _____

THIS FORM MUST BE RETURNED TO SCHOOL IN ORDER FOR YOUR CHILD TO PARTICIPATE ON MARCH 19, 1999.